Worksheet Certification Template

I certify that the information on the worksheet that I am providing is based on the actual bills for eligible services that the FCC Form 471 applicant has received from the vendor whose SPIN is associated with the approved E-Rate discounts. I also certify that the sample bill(s) provided is representative of the other items on the worksheet.

Signature	Dochyt houseine
	3 10 0
Print Name	Bocky Chewning
	$\langle \cdot \rangle$
Company /	
Organization	Lutheran High School-Rock port Litheran High
Title	Figance Director
	1 1
Date	8/18/16

Applicant Name: Lutheran High School - Rockford Lutheran High	
Service Provider (SP) Name: 143035551	
Submitter Invoice Number: Comcast2	
SLD Invoice Number: 2411730	
Funding Request Number (FRN): 2717953	
Description of Service for (FRN): Voice services	

Month	Billing Account #	Bill Date	CURRENT CHARGES	Ineligible \$	description of	ineligible Page
					ineligibles	#
July	871103480385428	6/2/2015		\$119.90		
July	871103451708194	6/20/2015		\$119.90		
Aug	871103480385428	7/2/2015		\$119.90		
Aug	871103451708194	7/20/2015		\$119.90		
Sept	871103480385428	8/2/2015		\$119.90		
Sept	871103451708194	8/20/2015		\$119.90		
Oct	871103480385428	9/2/2015		\$119.90	Internet	
Oct	871103451708194	9/20/2015		\$119.90		
Nov	871103480385428	10/2/2015		\$119.90		
Nov	871103451708194	10/20/2015		\$119.90		
Dec	871103480385428	11/2/2015		\$119.60	Internet	
Dec	871103451708194	11/20/2015	\$ 205.34		Internet	
Jan	871103480385428	12/2/2015	\$ 257.51	\$169.90	Internet	
Jan	871103451708194	12/20/2015	\$ 297.28		Internet	
Feb	871103480385428	1/2/2016	\$ 259.65	\$169.90	Internet	
Feb	871103451708194	1/20/2016	\$ 258.28	\$169.90	Internet	
Mar	871103480385428	2/2/2016	\$ 250.16	\$169.90	Internet	
Mar	871103451708194	2/14/2016	\$ 258.28		Internet	
Арг	871103480385428	3/2/2016	\$ 250.15	\$169.90	Internet	
Apr	871103451708194	3/20/2016	\$ 258.25	\$169.90	Internet	
May	871103480385428	4/2/2016	\$ 250.14	\$169.90	Internet	
May	871103451708194	4/20/2016	\$ 258.27	\$169.90	Internet	
June	871103480385428	5/2/2016		\$169.90	Internet	
June	871103451708194	5/20/2016	\$ 258.27	\$169.90	Internet	
		Total	\$5,515.55	\$3,477.30		
		less ineligible	\$3,477.30			
		Adjusted Tot	\$2,038.25			
		Disc %	20.00%			
		Disc Amt	\$407.65			

Discounted Amount from Above Requested Amt for FRN Modification \$407.65 \$538.37 \$130.72

SLD Invoice Number	2411730
Invoice Line Number	8080374
Service Provider Name	Comcast IP Phone LLC
Service Provider SPIN	143035551
Service Provider Invoice #	Comcast2
Undiscounted Invoice Amount	\$161.64
Discounted Invoice Amount	\$32.33
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAI

Discounted Invoice Amount	100.00		
Applicant Name	LUTHER	AN I	HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name		_	
Representative / Contact Title			
Representative / Contact Phone			
Billed Entity Number (BEN)	71499		
471 Number	995736		
FRN	2717953		
Date Goods/Services Delivered			
Date Goods/Services were or will be Installed			
Date Applicant Portion Paid and Check No. or Date will be Paid			
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		Or	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes \(\sum_{\text{No}} \) No			Copy of supporting contract must be attached if indicated below Supporting Contract Required YESNO
Signed: Solono liquidition Ves No			Signed:
Date: 0/19/20/(0			Date:

SLD Invoice Number	241173	0	
Invoice Line Number	808037	5	
Service Provider Name	Comcas	st IP I	Phone LLC
Service Provider SPIN	143035	551	
Service Provider Invoice #	Comcas	st2	
Undiscounted Invoice Amount	\$161.64	1	
Discounted Invoice Amount	\$32.33		
Applicant Name	LUTHE	RAN	HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name			
Representative / Contact Title			
Representative / Contact Phone			
Billed Entity Number (BEN)	71499		
471 Number	995736		
FRN	271795	3	
Date Goods/Services Delivered			
Date Goods/Services were or will be Installed			
Date Applicant Portion Paid and Check No. or Date will be Paid			
This is to certify that I am authorized to represabove named Applicant. This is also to certify services described on the attached vendor invodelivered and/or installed as indicated by the dabove.	the the vice were	Or	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of detailed vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No			Copy of supporting contract must be attached if indicated below Supporting Contract Required YESNO
Signed: Signed	re		Signed:

	1	
SLD Invoice Number	2411730	
Invoice Line Number	8080376	
Service Provider Name	Comcast	IP Phone LLC
Service Provider SPIN	1430355	51
Service Provider Invoice #	Comcast	2
Undiscounted Invoice Amount	\$161.75	
Discounted Invoice Amount	\$32.35	
Applicant Name	LUTHER	AN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name		
Representative / Contact Title		
Representative / Contact Phone		
Billed Entity Number (BEN)		
471 Number	995736	
FRN 2		
Date Goods/Services Delivered		
Date Goods/Services were or will be Installed		
Date Applicant Portion Paid and Check No. or Date will be Paid		
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		Or The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No		Copy of supporting contract must be attached if indicated below Supporting Contract Required YES NO
Signed No Coal WW	12	Signed:

sed 08/27/2012 Schools and Library Division (USAC)

Date:

SLD Invoice Number	2411730	
Invoice Line Number	8080377	
Service Provider Name	Comcast IP Phone LLC	
Service Provider SPIN	143035551	
Service Provider Invoice #	Comcast2	
Undiscounted Invoice Amount	\$161.76	
Discounted Invoice Amount	\$32.35	

Discounted Invoice Amount	ψ02.00	
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH	
Representative / Contact Name		
Representative / Contact Title		
Representative / Contact Phone		
Billed Entity Number (BEN)	71499	
471 Number	995736	
FRN	2717953	
Date Goods/Services Delivered		
Date Goods/Services were or will be Installed		
Date Applicant Portion Paid and Check No. or Date will be Paid		
This is to certify that I am authorized to represe above named Applicant. This is also to certify services described on the attached vendor invol delivered and/or installed as indicated by the da above.	y the invoice are deposits or up-front charges for services, bice were which have not been delivered, and have been agreed to	
Copy of detailed vendor invoice must be atta Contract with Service Provider above is for Delivery only Yes No Delivery and Installation Yes No	tached. Copy of supporting contract must be attached if indicated below Supporting Contract Required YES NO	

Signed:

Date:

Schools and Library Division (USAC)

SLD Invoice Number	2411730			
Invoice Line Number	8080378			
Service Provider Name	Comcast IP Phone LLC			
Service Provider SPIN	143035551			
Service Provider Invoice #	Comcast2			
Undiscounted Invoice Amount	\$161.76			
Discounted Invoice Amount	\$32.35			
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH			
Representative / Contact Name				
Representative / Contact Title				
Representative / Contact Phone				
Billed Entity Number (BEN)	71499			

Representative / Contact Phone			
Billed Entity Number (BEN)	71499		
471 Number	995736		
FRN	2717953		
Date Goods/Services Delivered			
Date Goods/Services were or will be Installed			
Date Applicant Portion Paid and Check No. or Date will be Paid			
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		Or	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of detailed vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes No Delivery and Installation Yes No			Copy of <u>supporting contract</u> must be attached if indicated below Supporting Contract Required YES NO
Signed: Peliecca (hours	-8		Signed:
Date: 9/19/10	7		Date:

	,
SLD Invoice Number	2411730
Invoice Line Number	8080379
Service Provider Name	Comcast IP Phone LLC
Service Provider SPIN	143035551
Service Provider Invoice #	Comcast2
Undiscounted Invoice Amount	\$223.04
Discounted Invoice Amount	\$44.61
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN

Discounted Invoice Amount	\$44.61			
Applicant Name	LUTHERA	AN H	IGH SCHOOL- ROCKFORD LUTHERAN	≀ HIGH
Representative / Contact Name				
Representative / Contact Title				
Representative / Contact Phone				
Billed Entity Number (BEN)	71499			
471 Number	995736			
FRN	2717953			
Date Goods/Services Delivered				
Date Goods/Services were or will be Installed			•	
Date Applicant Portion Paid and Check No. or Date will be Paid				
This is to certify that I am authorized to represent the above named Applicant. This is also to certify the services described on the attached vendor invoice were delivered and/or installed as indicated by the date(s) above.		; ,	The charges represented by the above represe invoice are deposits or up-front charges for so which have not been delivered, and have been based on the contract between the above refer Applicant and Service Provider	ervices, n agreed to
Copy of <u>detailed</u> vendor invoice must be attached. Contract with Service Provider above is for Delivery only Yes V No Delivery and Installation Yes			Copy of supporting contract must be attac indicated below Supporting Contract Required YES	hed if
Delivery and Installation Yes No Signed: Doloca Church	NP		Signed:	
Date: 9 19 10 Revised 08/27/2012			Date: Schools and Library Division (USAC))

SLD Invoice Number	2411730	
Invoice Line Number	8080380	
Service Provider Name	Comcast IP Phone LLC	
Service Provider SPIN	143035551	
Service Provider Invoice #	Comcast2	
Undiscounted Invoice Amount	\$317.13	
Discounted Invoice Amount	\$63.43	

Discounted Invoice Amount	\$63.43	
Γ		HIGH COURCE POOKEOPD LITTLED AN AUGU
Applicant Name	LUTHERAN	HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name		
Representative / Contact Title		
Representative / Contact Phone		
Billed Entity Number (BEN)	71499	
471 Number	995736	
FRN	2717953	
Date Goods/Services Delivered		
Date Goods/Services were or will be Installed		
Date Applicant Portion Paid and Check No. or Date will be Paid		
This is to certify that I am authorized to repres above named Applicant. This is also to certify services described on the attached vendor invo delivered and/or installed as indicated by the d above.	the ice were	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be att Contract with Service Provider above is for	ached.	Copy of supporting contract must be attached if indicated below
Delivery only Yes 1 No Delivery and Installation Yes No No	<u> </u>	Supporting Contract Required YESNO
Signed: Dolerca Alu	Wile	Signed:
Date: 9/19/16		Date:
Revised 08/27/2012		Schools and Library Division (USAC)

	<u>.</u>			_
SLD Invoice Number	241173	0		
Invoice Line Number	808038	1		
Service Provider Name	Comcas	Comcast IP Phone LLC		
Service Provider SPIN	143035	143035551		
Service Provider Invoice #	Comcas	Comcast2		
Undiscounted Invoice Amount	\$268.63	3		
Discounted Invoice Amount	\$53.73			
Applicant Name	LUTHE	RAN H	IIGH SCHOOL- ROCKFORD LUTHERA	N HIGH
Representative / Contact Name				
Representative / Contact Title				
Representative / Contact Phone				
Billed Entity Number (BEN)	71499			
471 Number	995736			
FRN	271795	3		
Date Goods/Services Delivered				
Date Goods/Services were or will be Installed				
Date Applicant Portion Paid and Check No. or Date will be Paid				
This is to certify that I am authorized to repres above named Applicant. This is also to certify services described on the attached vendor invo- delivered and/or installed as indicated by the cabove.	the bice were late(s)	Or	The charges represented by the above representation invoice are deposits or up-front charges for swhich have not been delivered, and have been based on the contract between the above reference Applicant and Service Provider	services, en agreed to erenced
Copy of detailed vendor invoice must be att Contract with Service Provider above is for Delivery only Yes No	•		Copy of supporting contract must be attaindicated below Supporting Contract Paguired VES	ched if
Delivery and Installation Yes No	.60		Supporting Contract Required YES	<u> </u>

Signed:

Date:

SLD Invoice Number	2411730
Invoice Line Number	8080382
Service Provider Name	Comcast IP Phone LLC
Service Provider SPIN	143035551
Service Provider Invoice #	Comcast2
Undiscounted Invoice Amount	\$268.63
Discounted Invoice Amount	\$53.73
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN
Representative / Contact Name	

Discounted invoice Amount	<u></u>	
Applicant Name	LUTHERA	N HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name		
Representative / Contact Title		
Representative / Contact Phone		
Billed Entity Number (BEN)	71499	
471 Number	995736	
FRN	2717953	
Date Goods/Services Delivered		
Date Goods/Services were or will be Installed		
Date Applicant Portion Paid and Check No. or Date will be Paid		
This is to certify that I am authorized to repres above named Applicant. This is also to certify services described on the attached vendor invo- delivered and/or installed as indicated by the d above.	the lice were	The charges represented by the above represented invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be att Contract with Service Provider above is for		Copy of supporting contract must be attached if indicated below
Delivery only Yes No Delivery and firstallation Yes No		Supporting Contract Required YESNO
signed: Pellecca Chair	MINE	Signed:
Date: 9 19 16	\mathcal{A}	Date:
Revised 08/27/2012	\sim	Schools and Library Division (USAC)

SLD Invoice Number	2411730
Invoice Line Number	8080383
Service Provider Name	Comcast IP Phone LLC
Service Provider SPIN	143035551
Service Provider Invoice #	Comcast2
Undiscounted Invoice Amount	\$268.61
Discounted Invoice Amount	\$53.72
Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name	
Representative / Contact Title	
Representative / Contact Phone	
Billed Entity Number (BEN)	71499
471 Number	995736
FRN	2717953
Date Goods/Services Delivered	
Date Goods/Services were or will be Installed	
Date Applicant Portion Paid and Check No. or Date will be Paid	
This is to certify that I am authorized to represe above named Applicant. This is also to certify services described on the attached vendor invo delivered and/or installed as indicated by the d above.	fy the invoice are deposits or up-front charges for services, which have not been delivered, and have been agreed to date(s) based on the contract between the above referenced Applicant and Service Provider
Copy of <u>detailed</u> vendor invoice must be attacentract with Service Provider above is for Delivery only Delivery and Installation Yes No No	Copy of supporting contract must be attached if indicated below Supporting Contract Required YES NO
Signed: Tobleca Chilox	Signed:

SLD Invoice Number	2411730
Invoice Line Number	8080384
Service Provider Name	Comcast IP Phone LLC
Service Provider SPIN	143035551
Service Provider Invoice #	Comcast2
Undiscounted Invoice Amount	\$268.61
Discounted Invoice Amount	\$53.72

Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name	
Representative / Contact Title	
Representative / Contact Phone	
Billed Entity Number (BEN)	71499
471 Number	995736
FRN	2717953
Date Goods/Services Delivered	
Date Goods/Services were or will be Installed	
Date Applicant Portion Paid and Check No. or Date will be Paid	
This is to certify that I am authorized to repre above named Applicant. This is also to certif services described on the attached vendor inv delivered and/or installed as indicated by the	y the invoice are deposits or up-front charges for services, oice were which have not been delivered, and have been agreed to

above.

Applicant and Service Provider

Copy of supporting contract must be attached if
indicated below
Supporting Contract Required YES NO
Supporting Contract Required TES NO
Signed:
Date:

SLD Invoice Number	2411730	
Invoice Line Number	8080385	
Service Provider Name	Comcast IP Phone LLC	
Service Provider SPIN	143035551	
Service Provider Invoice #	Comcast2	
Undiscounted Invoice Amount	\$268.61	
Discounted Invoice Amount	\$53.72	

Applicant Name	LUTHERAN HIGH SCHOOL- ROCKFORD LUTHERAN HIGH
Representative / Contact Name	
Representative / Contact Title	
Representative / Contact Phone	
Billed Entity Number (BEN)	71499
471 Number	995736
FRN	2717953
Date Goods/Services Delivered	
Date Goods/Services were or will be Installed	
Date Applicant Portion Paid and Check No. or Date will be Paid	
This is to certify that I am authorized to repres above named Applicant. This is also to certify services described on the attached vendor invo	the invoice are deposits or up-front charges for services,

delivered and/or installed as indicated by the date(s) above.

based on the contract between the above referenced Applicant and Service Provider

Copy of detailed vendor invoice must be attached.	Copy of supporting contract must be attached if		
Contract with Service Provider above is for	indicated below		
Delivery only Yes 📈 No			
Delivery and Installation Yes No	Supporting Contract Required YES NO		
Signed Delecca (howr-	Signed:		
Date: 9 1914	Date:		

Revised 08/27/2012

Schools and Library Division (USAC)

Account Number Billing Date

8771 10 345 1708194 11/20/15

\$205.34

Total Amount Due Payment Due By

12/18/15 Page 1 of 4



Contact us: www.business.comcast.com 1-800-391-3000



Rockford Lutheran Sr H Jr

For service at: 3411 N ALPINE RD OFC **ROCKFORD IL 61114-4801**

News from Comcast

Thank you for choosing Comcast.

Go paperless with Ecobill, sign up to view and pay your Comcast Business bill online at business.comcast.com/myaccount

Comcast Business Online Account: Service at your fingertips Use your online account to manage services, pay your bill, and shop for business-grade apps. Simply go to business.comcast.com/myaccount to register.

N	onth	ly Stat	ement S	ummary	
_		-			

205.34 Previous Balance -205,34 Credit Card Payment - 11/11/15 205,34 New Charges - see below \$205.34 Total Amount Due 12/18/15 Payment Due By

	kranin ketaga yang Patan an al- in ini ini bagai
Comcast High-Speed Internet	119.90
Comcast Digital Voice	72.85
Other Charges & Credits	3.17
Taxes, Surcharges & Fees	9.42
Total New Charges	\$205.34

You saved \$20.00 this month with your Comcast Services!

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.

omcast

If undeliverable, please return to: 4450 KISHWAUKEE ST ROCKFORD IL 61109-0000 8633 0D10 NO RP 20 11212015 NNNNNYNN 01 000942 0004

ROCKFORD LUTHERAN SR H JR 3411 N ALPINE RD OFO **ROCKFORD, IL 61114-4801**

ւիսկոներկիցերկիկիկիկիկին թվուրկին հայարարում և

Account Number	8771 10 345 1708194
Payment Due By	12/18/15
Total Amount Due	\$205.34
Amount Enclosed	\$

Make checks payable to Comcast, and remit to address below.

COMCAST PO 80X 3001 SOUTHEASTERN PA 19398-3001 միիլի Ֆիկոլի (Արայինի հայրի արևինի հրայինի հրայինի հրային հայրերի հրային հայրենի հրային հայրերի հրային հայրեր

Service Details

Contact us: www.business.comcast.com



1-800-391-3000

Account Number Billing Date **Total Amount Due** Payment Due By

8771 10 3 11/20/15 \$205.34 12/18/15

Page 2 of 4

Comcast High-Spe	ed Internet	
Internet Premium Pkg	11/27 - 12/26	99.95
Business Internet		
Static IP -1	11/27 - 12/26	19.95
Total Comcast High-Speed Internet		\$119.90

Comcast Digital Voice
Ear Talenhane Number(s): (815)708-7264 (815)904-6291

Total Comcast Digital Voice		\$72.85
View Voice Detail at www.business.comcast.com/	myaccount	
Service Discount		-10.00
Business Voice		
Voice Line	11/27 - 12/26	39.95
Service Discount		-10.00
Business Voice	~~~*	
Voice Line	11/27 - 12/26	39.95
8 Line Modem		
Equipment Fee	11/27 - 12 / 26	12.95
For Telephone Number(s): (815)7	08-7264, (815)904-	6291

Total Other Charges & Credits	\$3.17
Regulatory Recovery Fees	1.01
Universal Connectivity Charge	2.16
Other Charges & Credits	

Taxes, Surcharges & Fees.

Digita	Voice	
	Infrastructure Maintenance Fee	0.31
**********	State and Local Excise Tax	8.11
	911 Fee(s)	1.00

Total Taxes, Surcharges & Fees

Important Account Information

The Regulatory Recovery Fee is neither government mandated nor a tax, but is assessed by Comcast to recover the costs of certain federal, state and local impositions related to voice services.

A \$9.50 late fee is assessed for all balances not paid within 30 days following the bill date. Additional late fees and charges may be assessed in the event the account is not paid. A \$25.00 fee is assessed for field collections due to nonpayment. A \$30 fee is assessed for returned payments.

IMPORTANT PRICE INFORMATION: Beginning January 1st, 2016, the following monthly rates will increase for customers with Compast Business Internet, Compast Business Voice, and/or Comcast Business TV. The equipment fee for modems used with Comcast Business Internet or Business Voice will increase to \$14.95 per month (plus applicable tax). Broadcast TV Fee will increase to \$5.00. Video packages that include Regional Sports Networks will incur an additional fee of \$3.00.

Moving? Let us help.





Your Franchise Authority Is: City Of Rockford 425 E. State St. Rockford, IL 61104. FCC Unit Is IL0108

For Service Center locations near you, visit http://customer.xfinity.com/service-center-locations

Hearing/Speech Impaired Call 711 for Customer Service

Account Number Billing Date **Unpaid Balance** New Charges

Total Amount Due

Credit Card Payment - 12/13/15

New Charges - Due by 01/30/16

See below for more information

Unpaid Balance - Due Now

Monthly Statement Summary

8771 10 348 0385428 01/02/16

\$237.51 - Due Now \$259.65 - Due 01/30/16

\$497.16 Page 1 of 4



Contact us: @ www.business.comcast.com 1-800-391-3000

Academy Rockford Lutheran

For service at: 1711 DELCY DR OFC 1 **ROCKFORD IL 61107-2307**

News from Comcast

PAST DUE - PLEASE PAY Your account is now past due and has been assessed a late fee. To avoid service interruption, please ensure your payment is received BEFORE 02/01/16. To avoid delays, you may pay in person at one of our payment centers or you may call us at 800-391-3000. Please disregard if payment has been made.

Comcast Business Online Account: Service at your fingertips Use your online account to manage services, pay your bill, and shop for business-grade apps. Simply go to business.comcast.com/myaccount to register.

Comcast Digital Voice Other Charges & Credits

Total Amount Due

Previous Balance

Taxes, Surcharges & Fees

Total New Charges

\$497.16

257,51

-20.00

237.51

259.65

New Charges Summary

(a) Comcast High-Speed Internet

X 169.90

74.85

12.85

2.05

\$259.65

Go paperless with Ecobill, sign up to view and pay your Comcast Business bill online at business.comcast.com/myaccount

You saved \$20,00 this month with your Comcast Services!

274.27 due : 1222.89 227 due : 1222.89 URGrade

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.

comcast

If undeliverable, please return to: 4450 KISHWAUKEE ST ROCKFORD IL 61109-0000 8633 0010 NO RP 02 01032015 NNNNNYNN 01 001742 0007

ACADEMY ROCKFORD LUTHERAN 1711 DELOY DR OFG 1 **ROCKFORD, IL 61107**

- Արգիլ գույն առանակում է ՄԵՄ իրա հայուրի իրի Միրիայի ավիականակի

Account Number	8771 10 348 0385428
Payment Due By	Due Now
Total Amount Due	\$497.16
Amount Enclosed	\$

Make checks payable to Comcast, and remit to address below.

COMCAST PO BOX 3002 SOUTHEASTERN PA 19398-3002 իկենիլը կորդը ժրվը սի Սեռենըը (իրկայերինը) ին



Service Details

Contact us: www.business.comcast.com 1-800-391-3000



Account Number Billing Date Unpaid Balance **New Charges Total Amount Due** 8771 10 348 0885428 01/02/16 \$237.51 - Due Now

\$259.65 - Due 01/30/16 \$497.16 Page 2 of 4

Total Comcast High-Speed Internet		\$189.90
Static IP -1	01/08 - 02/07	19.95
Business Internet		
Deluxe 75 Pkg	01/08 - 02/07	149.95
Comcast High-Sp		

Con	icast	Dìo	jit	a

View Voice Detail at

For Telephone Number(s): (7	79)423-1753, (779)423-1	825
Equipment Fee	01/08 - 02/07	14.95
8 Line Modem		
Voice Line	01/08 - 02/07	39.95
Business Voice		
Service Discount		-10.00
Voice Line	01/08 - 02/07	39.95
Business Voice		
Service Discount		-10.00

Total Comcast Digital Voice	\$74.85
Other Charges & Credits	

www.business.comcast.com/myaccount

Late Fee	01/02	9.50
Universal Connectivity Charge		2.29

Total Other Charges & Credits	\$12.85
Regulatory Recovery Fees	1.06
Other Charges & Credits, cont.	

	\$2.05
911 Fee(s)	1.74
Infrastructure Maintenance Fee	0.31
Digital Voice	
Taxes, Surcharges & Fees	

Important Account Information

The Regulatory Recovery Fee is neither government mandated nor a tax, but is assessed by Comcast to recover the costs of certain federal, state and local impositions related to voice services.

A \$9.50 late fee is assessed for all balances not paid within 30 days following the bill date. Additional late fees and charges may be assessed in the event the account is not paid. A \$25.00 fee is assessed for field collections due to nonpayment. A \$30 fee is assessed for returned payments.





Your Franchise Authority Is: Winnebago County 404 Elm St. Rockford, IL 61101. FCC Unit Is IL0126

For Service Center locations near you, visit http://customer.xfinity.com/service-center-locations

Hearing/Speech Impaired Call 711



Contact us: @ www.business.comcast.com (1-800-391-3000



Account Number

Billing Date Total Amount Due Payment Due By

8771 10 345 1708194

01/20/16 \$258.28 02/17/16 Page 1 of 4

Rockford Lutheran Sr H Jr

3411 N ALPINE RD OFC ROCKFORD IL 61114-4801

News from Comcast

Thank you for choosing Comcast.

Comcast Business Online Account: Service at your fingertips Use your online account to manage services, pay your bill, and shop for business-grade apps. Simply go to business.comcast.com/myaccount to register.

(શિંછમીની) કોંદીઓમાઈ કેપોલામાં કુ	
Previous Balance	297.28
Credit Card Payment - 01/12/16	-297.28
New Charges - see below	258.28
Total Amount Due	\$258.28
Payment Due By	02/17/16

Ti	texez	(c)	en	Ĩ,	Τ	911	9,1	ĬΪΪ	٤)	137	
				£.				****			

Total New Charges

(6) Comcast High-Speed Internet (共) Comcast Digital Voice 74.85 Other Charges & Credits 3.35 Taxes, Surcharges & Fees 10.18

\$258.28

Managari (Millighting and Managara (Millighting and Managara) (danimetelistamitees)

Detach and enclose this coupon with your payment. Please write your account number on your check or money order. Do not send cash.

(comcast

If undeliverable, please return to: 4450 KISHWAUKEE ST ROCKFORD IL 61109-0000 8633 0010 NO RP 20 01212016 NNNNNNNN 01 999718

ROCKFORD LUTHERAN SR H JR 3411 N ALPINE RD OFC ROCKFORD, IL 61114-4801

8771 10 345 1708194 **Account Number** Payment Due By 02/17/16 \$258.28 **Total Amount Due Amount Enclosed** \$

Make checks payable to Comcast, and remit to address below.

COMCAST PO BOX 3001 SOUTHEASTERN PA 19398-3001

877110345170819400258285

Service Details

Contact us: @ www.business.comcast.com (1-800-391-3000

Billing Date Total Amount Due Payment Due By

8771 10 345 1708194 01/20/16 \$258.28 02/17/16 Page 2 of 4

Deluxe 75 Pkg	01/27 - 02/26	149.95
Business Internet		
Static IP -1	01/27 - 02/26	19.95
Total Comcast High-Speed Intern	et	\$169.90
(II) (Compassibilitation)	·	
For Telephone Number(s): (815)708	3-7264, (815)904-6	5291
Equipment Fee	01/27 - 02/26	14.95
8 Line Modem		
Voice Line	01/27 - 02/26	39.95
Business Voice		
Service Discount		-10.00
Voice Line	01/27 - 02/26	39.95
Business Voice		
Service Discount		-10.00
View Voice Detail at www.business.comcast.com/my	/account	
Total Comcast Digital Voice		\$74.85
(लामिक्सिक्स्कुल्याकार्याक		4
Universal Connectivity Charge		2.29
Regulatory Recovery Fees		1.06
Total Other Charges & Credits		\$3.35

and being about

Account Number

Digital Voice

Infrastructure Maintenance Fee	0.31
State and Local Excise Tax	8.13
911 Fee(s)	1.74

Total Taxes, Surcharges & Fees

Important Account Information

The Regulatory Recovery Fee is neither government mandated nor a tax, but is assessed by Comcast to recover the costs of certain federal, state and local impositions related to voice services.

A \$9.50 fate fee is assessed for all balances not paid within 30 days following the bill date. Additional late fees and charges may be assessed in the event the account is not paid. A \$25.00 fee is assessed for field collections due to nonpayment. A \$30 fee is assessed for returned payments.

The FCC modifies the rate that voice providers pay into the USF on a quarterly basis. USF is assessed on applicable voice services as the Universal Connectivity Charge at the FCC's approved rate. See:

http://www.fcc.gov/encyclopedia/contribution-factor-quarterly-fili ngs-universal-service-fund-usf-management-support. A new rate becomes effective 1/01/2016.

Moving? Let us help.





Your Franchise Authority Is: City Of Rockford 425 E. State St. Rockford, IL 61104. FCC Unit Is IL0108

For Service Center locations near you, visit http://customer.xfinity.com/service-center-locations

Hearing/Speech Impaired Call 711





Account Number Billing Date Total Amount Due

Auto Pay

8771 10 345 1708194

04/20/16 \$258.27 05/15/16 Page 1 of 2

Contact us: @ www.business.comcast.com (%) 1-800-391-3000



Rockford Lutheran Sr H Jr

For service at: 3411 N ALPINE RD OFC ROCKFORD IL 61114-4801

News from Comcast

Thank you for choosing Comcast.

Comcast Business Online Account: Service at your fingertips Use your online account to manage services, pay your bill, and shop for business-grade apps. Simply go to business.comcast.com/myaccount to register.

	
(Monthly Statement Submerty	
Previous Balance	258.28
Credit Card Payment - 04/14/16	-258.28
New Charges - see below	258.27
Total Amount Due	\$258.27

(New Charges Summery

Auto Pay

(f) Comcast High-Speed Internet

05/15/16

() Comcast Digital Voice

74.85

Other Charges & Credits Taxes, Surcharges & Fees

3.34 10.18

Total New Charges

\$258.27

illiantsyconforticing avalued **(हिलाक्ट्रिक्ट्र)** अध्यक्ति ।

(comcast

4450 KISHWAUKEE ST ROCKFORD IL 61109-0000 8633 0010 NO RP 20 04212016 NNNNNNNN 01 999944

ROCKFORD LUTHERAN SR H JR 3411 N ALPINE RD OFC ROCKFORD, IL 61114-4801

Account Number

8771 10 345 1708194

Auto Pay

Total Amount Due

05/15/16 \$258.27

Credit Card Payment To Be Applied 05/15/16

COMCAST PO BOX 3001 SOUTHEASTERN PA 19398-3001

877110345170819400258277

comcast.

Service Details

Contact us: @ www.business.comcast.com (1-800-391-3000



Account Number Billing Date Total Amount Due Auto Pay

8771 10 345 1708194 04/20/16 \$258.27 05/15/16 Page 2 of 2

(a) (convertible seather	ા લક	
Deluxe 75 Pkg	04/27 - 05/26	149.95
Business Internet		
Static IP -1	04/27 - 05/26	19.95
Total Comcast High-Speed Interne	et	\$169.90
()) (अनातकार्यक्रमाध्यक्षिक		
For Telephone Number(s): (815)708	-7264, (815)904-6	291
Equipment Fee	04/27 - 05/26	14.95
8 Line Modem		
Voice Line	04/27 - 05/26	39.95
Business Voice		
Service Discount		-10.00
Voice Line	04/27 - 05/26	39.95
Business Voice		
Service Discount		-10.00
View Voice Detail at www.business.comcast.com/my	account	
Total Comcast Digital Voice		\$74.85
(onerdinges@deals)		
F. CLAMBON CONFIDENCE CONTRACTOR STATES CONTRACT		
Universal Connectivity Charge		2.27
Regulatory Recovery Fees		1.07
Total Other Charges & Credits		\$3.34

\$10.18
1.74
8.13
0.31

Important Account Information

The Regulatory Recovery Fee is neither government mandated nor a tax, but is assessed by Comcast to recover the costs of certain federal, state and local impositions related to voice services.

A \$9.50 late fee is assessed for all balances not paid within 30 days following the bill date. Additional late fees and charges may be assessed in the event the account is not paid. A \$30 fee is assessed for field collections due to nonpayment. A \$30 fee is assessed for returned payments.

The FCC modifies the rate that voice providers pay into the USF on a quarterly basis. USF is assessed on applicable voice services as the Universal Connectivity Charge at the FCC's approved rate. See:

http://www.fcc.gov/encyclopedia/contribution-factor-quarterly-fili ngs-universal-service-fund-usf-management-support. A new rate becomes effective 4/01/2016.





Your Franchise Authority Is: City Of Rockford 425 E. State St. Rockford, IL 61104. FCC Unit Is IL0108

Hearing/Speech impaired Call 711

